

Driver Number **203596**

ORIGINAL - Submit to carrier  
DUPLICATE - Driver retain

**051908**  
(MONTH) (DAY) (YEAR)

Driver's Initials **BL**

**DRIVER'S DAILY LOG**  
(ONE CALENDAR DAY - 24 HOURS)  
CN only: Cycle: 70 hr. / 7day

**571**  
(TOTAL DRIVING MILES TODAY)

(CHECK IF MULTIDAY LOG)

*Bruce A. Luebke* **Bruce A. Luebke**  
(DRIVER'S SIGNATURE IN FULL) I certify these entries are true and correct:

P **67655** / T **25906**  
VEHICLE NUMBERS - (SHOW EACH UNIT)

**571**  
(TOTAL TRUCK MILEAGE TODAY)

(END DATE)  
\_\_\_\_\_  
(MONTH) (DAY) (YEAR)

T **26802** T/N/A T/N/A

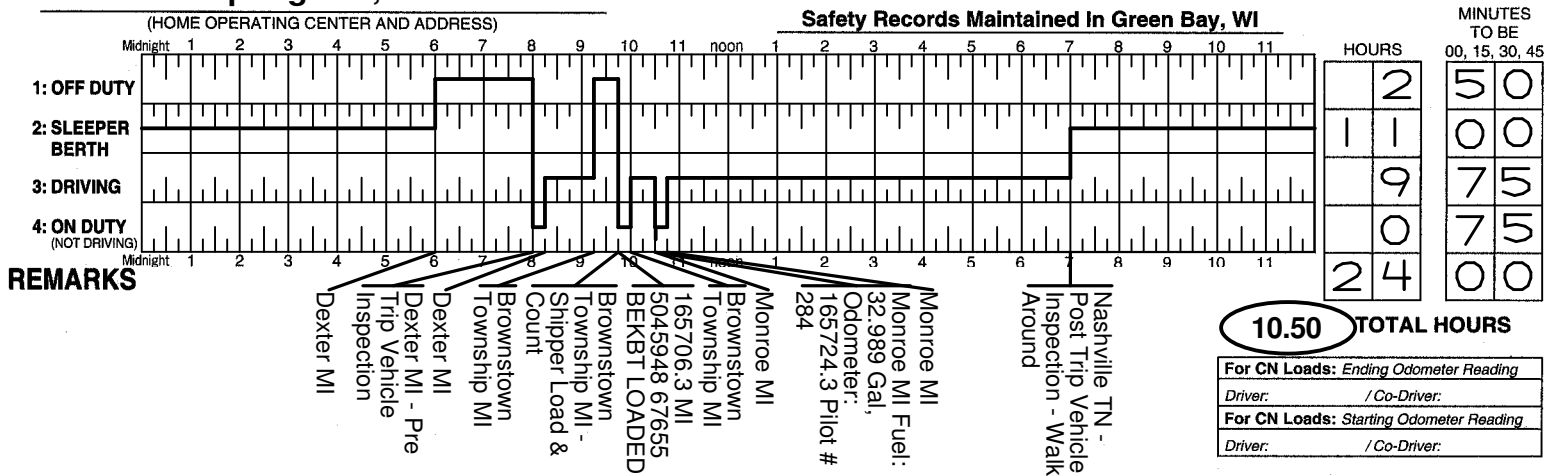
(NAME OF CO-DRIVER)

**Schneider National Carriers, Inc., Green Bay, WI**

**Springfield, MO**

(HOME OPERATING CENTER AND ADDRESS)

**Safety Records Maintained in Green Bay, WI**



SHIPPER:

**Solutia**

COMMODITY:

**Plastic Film**

LOAD NO.:

**5045948**

Each change of duty status must have a location in the "remarks" section. Use local time standard at home operating center.

**051908**  
(MONTH) (DAY) (YEAR)

**POST TRIP INSPECTION REPORT**

(Equipment is checked in accordance with Schedule 1 of the National Safety Code Standard 13)

TRACTOR/TRAILER NO.: **67655 - 25906; 26802**

I detect no defect in this motor vehicle likely to affect safe operation or result in mechanical breakdown.  
 I detect the following such defects - Describe in detail.

DRIVER'S NAME (PRINT): **Bruce A. Luebke**

DRIVER'S SIGNATURE: *Bruce A. Luebke*

Above defects corrected  
 Above defects need not be corrected

MECHANIC'S SIGNATURE: \_\_\_\_\_

DRIVER'S SIGNATURE: *Bruce A. Luebke*

DATE: \_\_\_\_\_

Cut log sheet to this line.